

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000001589
Entity Name
LIVING CHURCH OF GOD - A CALIFORNIA RELIGIOUS CO

FILED
Mar 07, 2000 8:00 am
Secretary of State
03-07-2000 90014 024 ****61.25

Principal Place of Business
WEST BERNARDO DR., STE 260
DIEGO CA 92127

Mailing Address
16935 WEST BERNARDO DR., STE 260
SAN DIEGO CA 92127-1661

Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number
33-0831039

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
KOBERNAT, RANDALL R
3484 CHAMBLEE ROAD
TALLAHASSEE FL 32308

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PCD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MEREDITH, RODERICK C		NAME		
STREET ADDRESS	7377 CELATA LN		STREET ADDRESS		
CITY-ST-ZIP	SAN DIEGO CA		CITY-ST-ZIP		
TITLE	VD	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MCNAIR, CARL E		NAME		
STREET ADDRESS	14930 AVENIDA VENUSTO, #12		STREET ADDRESS	16935 W Bernardo Dr, #260	
CITY-ST-ZIP	SAN DIEGO CA		CITY-ST-ZIP	San Diego, CA 92127	
TITLE	SD	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	AMES, RICHARD F		NAME		
STREET ADDRESS	7377 CELATA LN		STREET ADDRESS	16935 W Bernardo Dr, #260	
CITY-ST-ZIP	SAN DIEGO CA		CITY-ST-ZIP	San Diego, CA 92127	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	FALL, JEFFREY		NAME		
STREET ADDRESS	1040 CORONET		STREET ADDRESS		
CITY-ST-ZIP	GLENDORA CA		CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	DATTOLO, FRED		NAME		
STREET ADDRESS	14437 HILLNDALE WAY		STREET ADDRESS		
CITY-ST-ZIP	POWAY CA		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	FALL, JEFFREY		NAME		
STREET ADDRESS	1040 CORONET		STREET ADDRESS		
CITY-ST-ZIP	GLENDORA CA		CITY-ST-ZIP		

2. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
CFO
Date: 2/3/00 Daytime Phone #: 858 473-7470

CR2E037 (9/99)